PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

43889-937

. CLAIMS AS FILED - PART I (Column 1)						SMALL ENTITY (Column 2) TYPE			ITITY	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			11				Г	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ / minus 20=		•	D		X\$ 9=		OR	X\$18=	·
INDEPENDENT CLAIMS			/ () minus 3 =		*	7		X40=		OR	X80=	-10
MULTIPLE DEPENDENT CLAIM PRESENT							` -	.405				569
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	L	+135=		OR	+270=	12
CLAIMS AS AMENDED - PAR					TII			TOTAL		OR	TOTAL	1270
(Column 1) (Column 2)						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	r Ol 4444			X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		! T	+135=		OR	+270=	
							L_ ^-	TOTAL ODIT. FEE	-	00	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	. AL	DDIT. FEE			AUUN, FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. //	Minus	2	.0	=		X\$ 9=		OR	X\$18=	
	Independent	* / NTATION OF MI	Minus	***	3]=		X40=		OR	X80=	
	TINOTTRESE	IVIATION OF IM	OETIF EL DE	LINDEN	CLAIM		1	+135=		OR	+270=	
										OR	TOTAL ADDIT. FEE	
		(Column 1)	pro-	(Colu		(Column 3)		ODIT. FEE L			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF M	Minus	PENDENI	T CL AIM	=		X40=		OR	X80=	
<u> </u>	TINOT PRESE	INTATION OF M	OLITE DE	FENUEN	CLAIN	<u> </u>	1	+135=		OR	+270=	
**	If the "Highest Nu	mn 1 is less than t mber Previously P	aid For" IN TH	IS SPACE	is less tha	an 20, enter "20,	ــا -د ".	TOTAL		ΛD	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												